



THE UNITED STATES
CORPORATION
COMPANY

Page 00114475

ACCOUNT NO. : 072100000032

REFERENCE : 931674 7233899

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : December 14, 2000

ORDER TIME : 10:46 AM

ORDER NO. : 931674-005

CUSTOMER NO: 7233899

CUSTOMER: Mr. Chris .. Smith
Medical Resource Services,
Inc.
Suite 111
283 N. Northlake Blvd.
Altamonte Sprin, FL 32701

100003501461--1
-12/14/00--01068--019
*****70.00 *****70.00

DOMESTIC FILING

NAME: MEDICAL RESOURCE SERVICES,
INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - EXT. 1115
EXAMINER'S INITIALS:

FILED
00 DEC 14 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
00 DEC 14 PM 12:20
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

12-14

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Medical Resource Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

283 N. Northlake Blvd Suite 111
Altamonte Springs, Fl. 32701

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical Managemnt Software + Services

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Chris Smith - President
283 N. Northlake Blvd Ste 111
Altamonte Springs, Fl. 32701

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Chris Smith
283 N. Northlake Blvd Ste 111
Altamonte Springs, Fl. 32701

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Chris Smith
283 N. Northlake Blvd. Ste 111
Altamonte Springs, Fl. 32701

I, the undersigned, have been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature of Registered Agent

Date

Signature of Incorporator

Date

FILED
00 DEC 14 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA